Please type a plus sign (+) inside this box

Based on PTO/SB/05

OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

UTILITY **PATENT APPLICATION TRANSMITTAL**

Attorne	y Docket No.	11-231		
First In	ventor or Applic	MAKINO et al.		
Title	SWITCHED SEMICOND APPARATU	-CAPACITOR L UCTOR PRESS S INCORPORA	OW-PASS FILTER A SURE SENSOR TING THE FILTER	S. P. DN

(Only fo	r new no	onprovisional a	applications under	37 C.F.R.§ 1.5	53(b))	Expres	ss Mail	Labe	l No.					
Se	ee MPEF		CATION ELE		on contents).	ADI	ORES	SS TO	Mail	Stop P	aten	or Patents t Application 22313-1450	17858
1. X * Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) 2. X Specification [Total Pages 41] -Descriptive title of the Invention -Cross Reference to Related Applications -Background of the Invention -Summary of the Invention						5. Microfiche Computer Program (Appendix) 6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Copy b. Paper Copy (identical to computer copy) C. Statement verifying identity of above copies ACCOMPANYING APPLICATION PARTS								
, SNC FEL	-De -Cla -Ab Dra Dath or a. D	tailed Description aims stract of the awing(s) (35 for partial strates) Copy from (for continuing in the second strates) TEMS 1 & 13 IN CONTINUING STATES		[Total Sheets [Total Sheets al or copy) cation (37 C.f. with Box 16 cor NVENTOR(S) it attached de d in the prior it 1.63(d)(2) ar it i	7 3 F.R§ 1.6 Inpleted Ideting application of 1.33(b) ALENTY D. EXCEPT.	on,).	7. [9. [10. [11. [12. [14. [15. [x x x x	Assig 37 C.F. Statem assignee) English Inform Staten Prelim Return (should *Small Staten (PTOSI Certific (if fore	nee: DE R.§ 3.73 ent (wher h Trans ation Di nent (ID inary Al i Receip d be spo I Entity nent(s) 309-12 jed Copy ign prio	ENSO (36b) In there is an interest and inte	ocum ee 0-144 ent card (y iter Star Star ority E	(MPEP 503) mized) tement filed in prior applicatus still proper and desire	DS eation,
16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment: Continuation Divisional Continuation-in-part (CIP) of prior application No: Prior application information: Examiner For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 17. CORRESPONDENCE ADDRESS Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here)														
Name Address City Country				(Insen		State					Code			
Country					Teleph	none	1 (70	3) 707	7-9110		Fax	(70	3) 707-9112	
	Name	(Print/type)	DAVID G. P	osz -			Re	gistrati	on No. (Attomey	/Agent)		37,701	1
Signature								-	De	te	March 4, 2004	7		

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Mail Stop Patent Anglication, Adjunctor, VA 22202

March 4, 2004

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

	Complete if Known						
FEE TRANSMITTAL	Application Number						
	Filing Date	March 4, 2004					
for FY 2004	First Named Inventor	MAKINO et al.					
Effective 10/01/2003. Patent fees are subject to annual revision.	Examiner Name						
Applicant Claims small entity status. See 37 CFR 1.27	Art Unit						
OTAL AMOUNT OF PAYMENT (5) 810	Attorney Docket No.	11-231					

810

(\$)

TOTAL AMOUNT OF PAYMENT

Signature

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)								
X Check Credit card Money Other None	3. ADDITIONAL FEES Large Entity Small Entity Fee								
Deposit Account	Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description		,	Fee Paid	
Deposit Account Must 50-1147	1051	130	2051	65	Surcharge - late filing t	ee or oath			
Deposit Account Name POSZ & BETHARDS, PLC	1052	50	2052	25	Surcharge – late provis	sional filing fee o	or		
The Commissioner is authorized to: (check all that apply)	1053	130	1053	130	Non-English specificati	on			
Charge fee(s) indicated below Credit any overpayments	1812		1812	2.520	For filing a request for a		nination		
Charge any additional fee(s) during the pendency of this application	1804	920*	1804	920*	Requesting publication	•	iiiiduoii		
Charge fee(s) indicated below, except for the filling fee	1805	1,840*	1805	1,840*	Examiner action Requesting publication Examiner action	of SIR after			
to the above-identified deposit account.	4054	440	0054			.!- 6!4 41-			
FEE CALCULATION	1251	110	2251	55	Extension for reply with				
1. BASIC FILING FEE	1252	420	2252	210	Extension for reply with	in second mon	ith		
Large Entity Small Entity	1253	950	2253	475	Extension for reply with	in third month			
Fee Fee Fee Fee Description Fee Paid	1254	1,480	2254	740	Extension for reply with	nin fourth month	1		
1001 770 2001 385 Utility filing fee 770	1255	2,010	2255	1005	Extension for reply with	nin fifth month			
1002 340 2002 170 Design filing fee	1401	330	2401	165	Notice of Appeal				
1003 530 2003 265 Plant filing fee	1402	330	2402	165	Filing a brief in support	of an appeal			
1004 770 2004 385 Reissue filing fee	1403	290	2403	145	Request for oral hearing	g			
1005 160 2005 80 Provisional filing fee	1451	1,510	1451	1,510	Petition to institute a pu	ublic use procee	eding		
	1452	110	2452	55	Petition to revive - una	voidable			
SUBTOTAL (1) (\$) 770	1453	1,330	2453	665	Petition to revive - unit	ntentional			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501	1,330	2501	665	Utility issue fee (or reis	sue)			
Fee from	1502	480	2502	240	Design issue fee				
Extra Claims below Fee Paid Total Claims 7 -20**= 0 × 18 = 0	1503	640	2503	320	Plant issue fee				
Independent 0 3 0 X 96 5 0	1460	130	1460	130	Petitions to the Commi	ssioner			
Ctaims 3 5 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	1807	50	1807	50	Processing fee under 3				
Large Entity Small Entity	1806	180	1806	180	Submission of Informat	tion Disclosure	Stmt		
Fee Fee Fee Fee <u>Fee Description</u> Code (\$)	8021	40	8021	40	Recording each patent		er	40	
1202 18 2202 9 Claims in excess of 20	1809	770	2809	385	property (times number of Filing a submission after (37 CFR § 1.129(a))		י		
1201 86 2201 43 Independent claims in excess of 3	1810	770	2810	385	For each additional inv				
1203 290 2203 145 Multiple dependent claim, if not paid	1801	770	2801	385	examined (37 CFR § 1 Request for Continued E		E)		
1204 86 2204 43 **Reissue independent claims	1802	900	1802	900	Request for expedited examination				
over original patent 1205 18 2205 9 **Reissue claims in excess of 20			ı		of a design application				
and over original patent SUBTOTAL (2) (\$\)	Other	r fee (sne	cify)						
** or number previously paid, if greater; For Reissues, see above		Other fee (specify) *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$\) All (1)				(0) 40			
and the second party in ground, it of recognition and above	1,600	OGU DY DAS	no ramy	oo raid		~= (<i>0)</i>	(\$) 40		
SUBMITTED BY						Complete (if a	applicable)		
Name (Print/Type) DAVID G POS7 -		egistration i		37 70	N1	Telephone	(703) 7	07-9110	1

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 37 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.